## APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES

(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

JUN1421 3:03PM

NOTE: This form must be on file with the qualifying officer before opening the campaign account.		1				OFFICI	E USE	ONLY	
1. CHECK APPROPRIATE BOX(ES):									
Initial Filing of Form	Re-filing to Change	): 🔀 T	reasurer/	eputy	Depository		Office		Party
2. Name of Candidate (in this order: First, Middle, Last)  3. Address (include post office box or street, city, state, zip							zip		
Michael A Horgan			code) 6361 E 6 Ave						
4. Telephone	5. E-mail address	Hiale	Hialeah, Fl 33013						
(786 ) 200-3425	mikehorgan1@yaho	o.com							
6. Office sought (include district, circuit, group number) City Council VII  7. If a candidate for a nonpartisan office, che applicable:  My intent is to run as a Write-In candidate for a nonpartisan office, che applicable:									
8. If a candidate for a partisan office, check block and fill in name of party as applicable: My intent is to run as a									
☐ Write-In ☒ No Party Affiliation ☐Party candidate.									
9. I have appointed the following person to act as my 💢 Campaign Treasurer 🔲 Deputy Treasurer									
10. Name of Treasurer or Deputy Treasurer									
Michael A Horgan									
11. Mailing Address					1	2. Telep	hone		
6361 E Ave (786) 200 - 2						34	25		
13. City	14. County	15. Sta	ate 16.	Zip Code	17. E-mail a	ddress			
Hialeah	Miami Dade	FI	330	)13	mikehorga	n1@ya	ahoo.con	1	
18. I have designated the following bank as my									
19. Name of Bank 20. Address									
Apollo Bank			1255 W						
21. City	22. County			23. State			24. Zip C	ode	
Hialeah	Miami Dade			FI			33012		
UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.									
25. Date			26. Signa	ature of Car	ndidate				
6/14/2021			X						
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)									
I,, do hereby accept the appointment (Please Print or Type Name)									
designated above as: Campaign Treasurer Deputy Treasurer.									
6/14/2021 <b>X</b> <i>M</i> · / <i>S</i>									
Date			Signature	Campai	gn Treasurer o	or Depu	ty Treasur	er	